

## CONTEXT

Since 2020, Médecins Sans Frontières (OCG) has established in Chad the Emergency Response Team (CERT) to respond rapidly to epidemics, mass influxes, nutritional crises, and natural disasters. This evaluation (Jan 2020 – July 2025), commissioned by Cell 4 and the country coordination, aimed to assess the relevance, performance, and sustainability of the mechanism and to propose an operational model adapted to the Chadian context, characterized by recurrent emergencies, limited national response capacity, and a constrained humanitarian presence.

## Key Findings

- **Relevance:** The pre-positioning of CERT was justified and relevant given the context and the lack of actors, but only 32% of confirmed alerts resulted in an exploratory mission by CERT. The EPREP thresholds, designed for sudden emergencies, were not the most suitable tool for recurring/seasonal crises, which require a more anticipatory and flexible process.
- **Coherence:** The model was aligned with OCG's strategic plan and EPREP priorities, but had limited autonomy and required better adaptation to predictable crises. The Ministry of Public Health welcomed CERT's support while highlighting delays in some responses and inconsistencies between different MSF operational centers.
- **Effectiveness:** 61% of indicators were achieved (2024). Interventions demonstrated strong medical results: vaccination campaigns exceeded 100% coverage and significantly reduced mortality. The average delay of 50 days between alert and intervention remains above MSF standards (8–15 days).
- **Efficiency:** Resources and budget were adequate but under-used; no pre-positioned stocks existed outside N'Djamena. A local structure remains more cost-effective than international alternatives.
- **Impact:** Medical objectives were reached, but data are insufficient to demonstrate long-term effects. Limited progress was noted on surveillance, prevention, and advocacy.

## Conclusions

CERT remains a relevant and necessary mechanism for emergency response in Chad, but the frequency of deployments, the low rate of confirmed alerts leading to exploratory missions, and its almost exclusive focus on reactive response limit its full potential. The model must evolve toward a more autonomous, anticipatory, and balanced structure.

### Main Recommendations:

- Simplify the approval chain and grant CERT greater autonomy to launch exploratory missions.
- Adapt the EPREP model: integrate anticipation windows and pre-authorized budgets for seasonal emergencies.
- Strengthen non-reactive activities (surveillance, prevention, advocacy, communication) and include them in the 2026 budget.
- Pre-position supplies outside N'Djamena (Salamat, Moyen-Chari, Ouaddai) and adjust staffing to seasonal crises.
- Maintain CERT as a national intervention team while improving efficiency and responsiveness.

## Methodology:

- Retrospective and formative evaluation (July–Sept 2025) following DAC criteria.
- **Sources:** document review; 40 key informant interviews; budget, medical, and metadata analyses (2023–2025).
- **Approach:** mixed methods, qualitative and quantitative triangulation.
- **Limitations:** no direct consultation of beneficiaries, incomplete data before 2022, security and access constraints mitigated through remote interviews.

## Lessons Learned

The seasonal nature of certain crises in Chad calls for a more anticipatory and decentralized approach, to strengthen CERT's ability to prepare, position itself, and respond with quality and within target timeframes.